

**FEE CALCULATION SHEET
(FOR USE WITH FORM 10-876)**

APPLICANT(S)

09/467509

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	INO.	DEF.	INO.	DEF.	INO.	DEF.
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50						
TOTAL INO.						
TOTAL DEF.						
EPAT.						

(NO.)	DEP.	(NO.)	DEP.	(NO.)	DEP.
61					
62					
63					
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98					
99					
100					
TOTAL NO.					
TOTAL DEP.					
TOTAL	1228551	1455351	1228551	1455351	1228551